

GEORGIA DEPARTMENT OF REVENUE
ALCOHOL & TOBACCO DIVISION
P O BOX 49728
ATLANTA GA 30359
(404) 417-4870

**STATE TAX APPLICATION
FOR
TOBACCO PERMIT**
(Read Instructions Before Completing)



FOR OFFICE USE ONLY	1. STATE TAXPAYER IDENTIFIER (STI)		TOBACCO LICENSE NUMBER	
	2. LEGAL BUSINESS NAME			
	BUSINESS ADDRESS			
	3. TYPE OF APPLICATION [] MANUFACTURER REPRESENTATIVE LICENSE [] WHOLESALE SALESMAN PERMIT			
	4. SOCIAL SECURITY NO.	LAST, FIRST, MIDDLE INITIAL OF APPLICANT	DATE OF BIRTH	
	5. HOME ADDRESS			
	6. CITY	STATE	ZIP CODE	
	7. MAILING ADDRESS (If different from home address)			
	8. BUSINESS PHONE NO.		HOME PHONE NO.	
	9. HOW LONG HAVE YOU BEEN EMPLOYED BY ABOVE MANUFACTURER / DISTRIBUTOR?			
	10. PROVIDE YOUR EMPLOYMENT HISTORY FOR THE PAST TEN (10) YEARS			
	FROM			
	Month/Yr.	EMPLOYER'S NAME AND ADDRESS		POSITION
11. HAVE YOU EVER BEEN ARRESTED OR HELD BY FEDERAL, STATE, OR ANY OTHER LAW-ENFORCEMENT AUTHORITIES FOR ANY VIOLATION OF FEDERAL LAW, STATE LAW, COUNTY, OR MUNICIPAL LAW, REGULATION, OR ORDINANCES? (Do not include traffic violations. All other charges must be included even if they were dismissed) [] YES [] NO				
<p>I DECLARE UNDER PENALTY OF PERJURY THAT THIS STATEMENT HAS BEEN EXAMINED BY ME, AND TO THE BEST OF MY KNOWLEDGE IS TRUE, CORRECT AND COMPLETE.</p> <p style="text-align: center;"> </p> <p style="text-align: center;"> Signature Title Date </p> <p>I HEREBY CERTIFY THAT _____ IS PERSONALLY KNOWN TO ME, THAT HE SIGNED HIS NAME TO THE FOREGOING APPLICATION AFTER STATING TO ME THAT HE KNEW AND UNDERSTOOD ALL STATEMENTS AND ANSWERS MADE THEREIN, AND UNDER OATH ACTUALLY ADMINISTERED BY ME, HAS SWORN THAT SAID STATEMENTS AND ANSWERS ARE TRUE.</p> <p>THIS _____ DAY OF _____, _____</p> <p style="text-align: right;">Notary Public</p>				